NOTICE OF FEE DUE

DATE:	L0403		
TO:	RE		
FROM: Office of Init	tial Patent Examination	on	
SUBJECT: Fee Due			;
APPLICATION NUMBI	er: <u>09</u> 0	125 894	,
A fee is due for the attack Office for the following rauthorization to charge a charge the appropriate fee the fee deficiency.	reason. Please check deposit account. If a	the application n authorization	n for the appropriate n is present, please
☐ Insufficient fee by ch	eck		
☐ Insufficient funds in c	deposit account		
☐ Declined credit card			•
Non authorization for	charge to deposit acc	ount	
□ No fee submitted per	requirement 🕏		
The correct fee code:	180/	amount	\$ 375
The suspended fee code:	-197 [999	amount	-\$ 370
Fee Due	(,	amount	=\$
If you have any questions Eleanor Kurtz at 703-308-	· -	ia Streater at	703-306-5430 or
Terminal Operator			

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [OR **SMALL ENTITY TOTAL CLAIMS** RATE SFEE & RATE FEE **FOR** NUMBER FILED **NUMBER EXTRA BASIC FEE** 355.00 BASIC FEE 710.00 OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR -/\. INDEPENDENT CLAIMS minus 3 = X40 =X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR The second If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **OR**TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY (Column 3) CLAIMS HIGHEST ADDI-REMAINING NUMBER ADDI-PRESENT **AMENDMENT** AFTER : **PREVIOUSLY** RATE TIONAL TIONAL RATE **EXTRA AMENDMENT** " PAID FOR FEE FEE Total k Kal Minus X\$9=X\$18= OR **""()**。 Independent Minus X40 =X80= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +135= +270= OR TOTAL ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ADDI-**NUMBER** ADDI-PRESENT **AMENDMENT** AFTER **PREVIOUSLY** TIONAL RATE **EXTRA** RATE TIONAL **AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X40= X80= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR Sec. 1 and the second profession of the second profes +135= +270= OR TOTAL 14. 14. 1.数1.4级设施 ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST REMAINING NUMBER ADDI-**PRESENT** ADDI-ENT **AFTER PREVIOUSLY EXTRA** RATE TIONAL RATE TIONAL AMENDMENT PAID FOR FEE FEE AMENDM Total Minus X\$ 9= X\$18= OR Independent Minus = X40 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X80 =OR +135= +270= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL TOTAL ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application	or	Dock	ket N	lumb	er

9,025896

CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL TYPE	ENTITY	OR		R THAN ENTITY		
FOR	1	NUMBI	R FILED	NUMBER	NUMBER EXTRA		FEE		RATE	FEE
BASI	C FEE						395.00	OR		790.00
тоти	TOTAL CLAIMS / minus 20 = *			x\$11=		OR	x\$22=			
INDEPENDENT CLAIMS / minus 3 = *			x41=	,	OR	x82=				
MULTIPLE DEPENDENT CLAIM PRESENT			+135=		OR	+270=				
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL	39510	OR	TOTAL				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)			SMALI	_ ENTITY	OR		R THAN ENTITY			
ent a		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
AMENDMENT	Independent	*	Minus	***	=	x41=		OR	x82=	
	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135=		OR	+270=	
		(Column 1)	·	(Column 2)	(Column 3)	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
NT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
AMEN	Independent	*	Minus	***	=	x41=		OR	x82=	
V	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135=		OR	+270=	
		(Column 1)		(Column 2)	(Column 3)	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOR	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
AMENDMENT	Independent	*	Minus	***	=	x41=		OR	x82=	
	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										